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Date: October 31, 2005 File Number: 9537-3

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Re: Patent Application No. 10658932
Inventor: D. Ku
Patent Application Entitled *Flexible Spinal Disc*
Our Ref. No. 9537-3;

**Revocation of Power of Attorney with New Power of Attorney
and Change of Correspondence Address Under 37 CFR 1.36**

Statement Under 37 CFR 3.73(b)

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PTO/SB/82 (04-05)

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/658,932
	Filing Date	September 8, 2003
	First Named Inventor	David N. Ku
	Art Unit	3738
	Examiner Name	David H. Willsee
	Attorney Docket Number	9537-3

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

20792

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

20792

OR

☐ Firm or
Individual Name

Address

City

State

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Country

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Matthew Miller

Date

31 OCTOBER 2005

Telephone

678-916-4744

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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PTO/SB/98 (09-04)

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: David N. KuApplication No./Patent No.: 10/658,932 Filed/Issue Date: September 9, 2003Entitled: Flexible Spinal Disc

SpineMedica Corp. a corporation
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
 2. ☐ an assignee of less than the entire right, title and interest.
 The extent (by percentage) of its ownership interest is _____ %

In the patent application/patent identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: David N. Ku To: SaluMedica, LLC
 The document was recorded in the United States Patent and Trademark Office at Reel 016652, Frame 0341, or for which a copy thereof is attached.
2. From: SaluMedica, LLC To: SpineMedica Corp.
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☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Matthew Miller
 Signature

Matthew Miller

31 OCT 2005
 Date

678-916-4744
 Telephone Number

Printed or Typed Name

President
 Title

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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